

Attorney  
requested written  
restriction  
6/14/01 MAH

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JED	75331	
O.I.P.E. CLASSIFIER		21	9/28/99
FORMALITY REVIEW	DB	65373	90-1-85

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
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22	✓	✓	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	✓	✓	
27	✓	✓	
28	N	N	
29	N	N	
30	N	N	
31	=	=	
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36	✓	✓	
37	N	N	
38	N	N	
39	N	N	
40	N	N	
41	✓	✓	
42	✓	✓	
43	✓	✓	
44	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here